

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 70/748034
APPLICANT(S)

FILING DATE

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS								
	IND	DEP	IND	DEP	IND	DEP			IND	DEP	IND	DEP	IND	DEP	
1	1		1												
2		1		1				31							
3		1		1				32							
4		2		2				33							
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7		1		1				36							
8		1		1				37							
9		2		2				38							
10		2		2				39							
11		1		1				40							
12		1		1				41							
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TOTAL IND.		2	2				TOTAL IND. TOTAL DEP. TOTAL CLAIMS								
TOTAL DEP.		31	31												
TOTAL CLAIMS		33	33												